ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION INITIALS ID NO. DATE

FEE DETERMINATION
O.I.P.E. CLASSIFIER
FORMALITY REVIEW
RESPONSE FORMALITY REVIEW
M. 294
9.29-10
P. 20-10

INDEX OF CLAIMS

~	Rejected	N	Non-alastad
=	Allowed		Interference
_	(Through numeral) Canceled	Α	
÷	Restricted	0	

±	Restricted	0	0
Claim Date	Claim	Date	Claim
iginal ignal			
Final Final Original	Final Original		Final Original
	51	╼┼┼┼┼┼┼┼	10
2	52	-+-+- -	101
3	53	-}-}-}-	102
。 ┌┤┪╂┼┼┼┼┼┼┼	4 <u> </u>		103
5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	54	- - - - - -	104
	55		105
	56		106
(8)	57		107
	58		108
10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	59		109
F-11111	60		110
12	61		111
	62	 	112
13	63	++++	113
14	64	 - - - - - - - - - - - - - - - - - - -	114
15	65	╅╸┝┈┼┈┼┈┤ ┈┤	115
16	66	╎╸┝╶╄╌┩╶┩	
17	67	╂╼╂╼╏═╏═ ╏	116
18	68	╂╾╂╌╂╌╏╶╏	117
19	69	╂╼╂═╂═╂═╂	118
20	70	+	119
21			120
22	71		121
23	72		122
24	73		123
25	74		124
	75		125
26	76		126
27	77		127
28	78		128
29	79	, 	129
30	80		
31	81		130
32	82		131
33	83		132
34	84		133
35	85	-+-+	134
36	86		135
37	87	-+	136
38	 	- - - - 	137
39	88	 	138
40	89		139
(5)	90		140
	91		141
42 43 43	92	 	142
+	93		143
44	94	╅┋	
45	95	╶╀╌╂╌╂╌ ┦╸╿	144
46	96	╼╂╼╂╼╂╼╃═┩	145
47	97	┼┼┼┼┤	146
48	98	╈┾┼┼┼┤╏	147
49	99	┼┼╎ ╎╎	148
501		┸	149

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

8೧೫ Available Copy

Date